	COMBINED DECLARATION AND POWER OF ATTORNEY
As a be	elow named inventor, I hereby declare that:
	TYPE OF DECLARATION
Γhis d	eclaration is of the following type:
Ø	original
	design ,
	supplemental
	divisional
	continuation
	continuation-in-part (CIP)
	INVENTORSHIP IDENTIFICATION
origina olural	idence, post office address and citizenship are as stated below next to my name, I believe I am the II, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if names are listed below) of the subject matter which is claimed and for which are a patent is sought invention entitled:
	TITLE OF INVENTION LOGICAL PCI BUS
	SPECIFICATION IDENTIFICATION
the spe	ecification of which: (complete (a), (b) or (c))
(a)	☑ is attached hereto.
(h)	□ was filed on as □ Serial No. o /

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information

or D Express Mail No., as Serial No. not yet known_

which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and

☐ In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

<u>Name</u>	<u>Title</u>	Registration Number
John L. Rooney Lawrence M. Nawrocki Wayne A. Sivertson Charles A. Johnson Michael B. Atlass Mark T. Starr	Attorney at Law Attorney at Law Attorney at Law Attorney at Law Attorney at Law Attorney at Law	28,898 29,333 25,645 20,852 30,606 28,762
SEND CORRESPONDENCE TO Unisys Corporation Charles A. Johnson P O Box 64942	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DIRECT TELEPHONE CALLS TO: (Name and telephone number) (651) 635-7702
MS 4773 St. Paul, MN 55164		

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of first inventor LLOYD E. THORSBAKKEN LLOYD E. THORSBAKKEN (GIVEN NAME) (MIDDLE INITIAL OR NAME) FAMILY (OR LAST NAME) Inventor's signature How Ethorship USA Date 15 Avg 20 Country of Citizenship USA Residence 419 98th Avenue Northwest, Blaine, Minnesota 55434 Post Office Address 419 98th Avenue Northwest, Blaine, Minnesota 55434

Full name of second inventor LAI	RRY L. BYERS	
LARRY (GIVEN NAME)	L. (MIDDLE INITIAL OR NAME)	BYERS FAMILY (OR LAST NAME)
	D D n	*
nventor's signature	Jay 5. 13	yee)
Date <u>8/13/0/</u> Country of Cit	izenship <u>USA</u>	
Residence <u>13814 Holyoke Patl</u>	n, Apple Valley, Minnesota 55124	
ost Office Address 13814 Holy	oke Path, Apple Valley, Minnesota	55124
Full name of third inventor MICH	IAEL R. OVERLEY	
MICHAEL	R. (MIDDLE INITIAL OR NAME)	OVERLEY
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
(nventor's signature	had R Overly	-
Date <u>8/15/01</u> Country of Cit	izenship <u>USA</u>	
Residence <u>7345 Mariner Drive</u>	, Maple Grove, Minnesota 55311	
Post Office Address 7345 Marin	er Drive, Maple Grove, Minnesota	55311